

**New Hampshire Division of Public Health
Performance Improvement Workplan**

Name of Program and Person (s) Responsible

Date
Cycle #

Broad Aim of the Project or Performance Measure:

Current baseline:

| Plan - the Change Based on problem identification, analysis and root causes described on the PDSA Worksheet | Do – Try the Change on a Small Scale | Study – Observe/Evaluate the Results of the Change | Act – Refine and Spread the Change |
|---|---|--|--|
| | | | |
| Problem statement defined: Performance measure(s) with baseline data: : | List change(s) to be implemented: Who, What, When, Where, How? What is the anticipated change and by when? What data will be collected? Who, What, When, Where, How? | Gather the data on the change Analyze the date on the change Was the change carried out as planned? Did you obtain the anticipated results? What new knowledge did you gain as a result of this change cycle? | What actions will be taken as a result of this change and evaluation cycle? If successful how will you spread the change? What systemic changes and training needs to take place for full implementation? What is the plan for ongoing monitoring? Are there incremental improvements to refine the change? What improvement opportunities come next? |

Name of Program and Person (s) Responsible
Early Hearing and Detection- A.B – Program Coordinator; C.D.- Program Consultant

Date November 22, 2005
Cycle # 1

New Hampshire Division of Public Health Performance Improvement Workplan

Broad Aim of the Project or Performance Measure:

All birthing hospitals will screen 95% of newborns for hearing by December 2004

Current baseline: 94%

| 1. Plan - the Change Based on problem identification, analysis and root causes described on the PDSA Worksheet | 2. Do – Try the Change on a Small Scale | 3. Study – Observe/Evaluate the Results of the Change | 4. Act – Refine and Spread the Change |
|--|---|---|--|
| <p>Problem statement defined: 5 NH hospitals fall short of this goal of 95%</p> <p>Performance measure(s) with baseline data:</p> <p>Hospitals will screen and report on 95% of all newborns by the end of their first year of screening.</p> <p>Happy Valley- 75% Gurgling River 89% Providian 84% Mt. Osgood 71% Green Meadows 76%</p> | <p>List change(s) to be implemented: Who, What, When , Where, How?</p> <p>Change # 1 Happy Valley and Gurgling River Hospitals will relocate their computers to the newborn nursery by January 2006. AB & CD will work with head nurses on this.</p> <p>Change #2 Providian and Mt. Osgood Hospitals will change their standard newborn care orders to include newborn hearing screening by February 2006. . AB & CD will work with head nurses on this.</p> <p>Change #3 Green Meadows Hospital will train 2 back-up staff to screen babies and enter data by January 2006. AB & CD will work with head nurses on this.</p> <p>What data will be collected?</p> | <p>Summarize the analysis of the data March 2006</p> <p>Happy Valley 85% Gurgling River 92% Providian 90% Mt. Osgood 80% Green Meadows 76%</p> <p>Was the change carried out as planned?</p> <p>Happy Valley and Gurgling River moved their computers in early January.</p> <p>Providian and Mt. Osgood changed their newborn care orders in January.</p> <p>Green Meadows has been unable to train back-up personnel due to a nursing shortage.</p> | <p>What actions will be taken as a result of this change and evaluation cycle?</p> <p>We will change our protocols and guidelines to recommend computers near the screening area, that newborn orders include newborn hearing screening and that there be at least 2 people trained (can be non-nurses) to do the screening.</p> <p>If successful how will you spread the change?</p> <p>We will make changes as noted above and discuss with hospitals on site visits.</p> <p>What systemic changes and training needs to take place for full implementation?</p> <p>See above</p> <p>What is the plan for ongoing monitoring?</p> <p>Data will be monitored monthly to look for ongoing progress . Monthly phone calls with the hospitals will</p> |

| | | | |
|---|---|---|--|
| : | <p>Who, What, When, Where, How ?</p> <p>The hospitals will continue to submit data on babies screened through the Auris data system. AB will monitor % of babies screened on a monthly basis to document change with Auris reports.</p> <p>AB will make monthly phone calls to the hospitals to monitor status of changes.</p> | <p>Did you obtain the anticipated results?</p> <p>In all but Green Meadows we are seeing improvement and will continue to monitor.</p> <p>We are working with Green Meadows to identify non-nursing staff to do the screening and data entry.</p> <p>What new knowledge did you gain as a result of this change cycle?</p> <p>There are some changes, which are fairly easy to implement such as moving existing computers and changing orders and a subsequent checklist. Staff shortages are more difficult to work with. However the hospital did not understand that they could use non-nursing staff, which caused a delay in the change and improved performance.</p> | <p>phone calls with the hospitals will take place to see if changes are still working.</p> <p>Are there incremental improvements to refine the change?</p> <p>No</p> <p>What improvement opportunities come next?</p> <p>We will be looking at data on referrals for follow-up on children screened to see if these take place in a timely manner.</p> |
|---|---|---|--|